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Enclosed are:

- (X) 21 pages of specification, including 19 claims and an abstract.  
(X) an executed oath or declaration, with power of attorney.  
( ) an unexecuted oath or declaration, with power of attorney.  
(X) 4 sheet(s) of informal drawing(s).  
( ) \_\_\_\_\_ sheet(s) of formal drawings(s).  
(X) Assignment(s) of the invention to USF CONSUMER & COMMERCIAL WATERGROUP, INC.  
(X) Assignment Form Cover Sheet.  
(X) A check in the amount of \$ 40.00 to cover the fee for recording the assignment(s) is enclosed.  
( ) Information Disclosure Statement.  
( ) Form PTO-1449 and cited references.  
( ) Associate power of attorney.  
( ) Priority Document.

10/090247  
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|                                      |           |   |    |   |          |   |          |   |             |
|--------------------------------------|-----------|---|----|---|----------|---|----------|---|-------------|
| a) Basic Fee                         |           |   |    |   |          |   |          |   | \$ 740.00   |
| b) Independent Claims                | <u>2</u>  | - | 3  | = | <u>0</u> | x | \$ 84.00 | = | \$ <u>0</u> |
| c) Total Claims                      | <u>19</u> | - | 20 | = | <u>0</u> | x | \$ 18.00 | = | \$ <u>0</u> |
| d) Fee for Multiple Dependent Claims |           |   |    |   |          |   | \$280.00 | = | \$ <u>0</u> |

Total Filing Fee                      \$ 740.00

- ( ) Applicant qualifies as a Small Entity, reducing Filing Fee by half to \$ \_\_\_\_\_ 0
- (X) A check in the amount of \$ 740.00 to cover the filing fee is enclosed.
- ( ) Charge \$ \_\_\_\_\_ to Deposit Account No. 07-2069.
- ( ) Other \_\_\_\_\_.
- (X) The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 07-2069. A duplicate copy of this sheet is enclosed.

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By: Lawrence J. Crain  
Lawrence J. Crain  
Registration No.: 31,497